

# Exhibit 4

UNITED STATES DISTRICT COURT FOR THE  
NORTHERN DISTRICT OF OKLAHOMA

PETER POE, *et al.*,

*Plaintiffs,*

v.

GENTNER DRUMMOND, *et al.*,

*Defendants.*

No. 23-CV-00177-JFH-SH

**SUPPLEMENTAL DECLARATION OF CURTIS E. HARRIS, M.S., M.D., J.D.**

I, Curtis E. Harris, declare the following:

1. I have read the critiques of my declaration by Plaintiffs and their witnesses and offer the following responses.
2. Dr. Janssen says that I make “claims about the safety and efficacy of this care without citing any sources other than his opinion and while neglecting to summarize the extant literature in the field.” Dr. Janssen ignores where I explained that “[t]his is a preliminary declaration, prepared on short notice.” I did not add citations because I had little time in which to prepare an initial declaration, both due to the quick deadline and my busy work schedule. The scope of the literature that impacts this proposed treatment is large, if one is looking for citations concerning estrogen, progesterone and testosterone side effects, potential benefits, and more. As a result, I made no claim that my declaration was a full and final expert report.
3. Dr. Janssen points out that I am “an adult endocrinologist who acknowledges that he does not have experience in treating transgender youth for gender dysphoria.” This is true, although it is not particularly meaningful. I have more than 40 years’ experience and training dealing with the clinical response of genetic male and female patients to

the hormones estrogen, progesterone, and testosterone. Nearly every transgender youth who is started on hormones at puberty will continue those hormones into adolescence and adulthood. Thus, if one wants to fully understand and explain what effect starting this treatment pathway will have on the short-, intermediate-, and long-term health of a patient, an adult endocrinologist needs to be consulted. Experience with prepubescent children is not essential for the understanding of both the genetics and biochemistry of the cells of the two sexes. Further, I understand how various medicines, including the sex hormones, work with both the adolescent and adult biochemistry.

4. As I wrote earlier, I have chosen not to provide these hormones and treatments in part because in my opinion the evidence for them is weak and subjective, they do more harm than good, and they should be administered, if at all, in a well-organized program with multiple professionals available to analyze various aspects of the treatment. It is common in the medical field for someone to be “outside” a practice area and analyze it through reading, studying, and applying lessons from similar experience elsewhere. There are many concerns in this area that must be answered before this becomes a recognized benefit to patients. The plaintiffs’ witnesses are trying to assert that they are the only scientific experts who should be consulted simply because of their personal experience, and that is not true.

I state under penalty of perjury that the foregoing is true and correct.

Executed on August 8, 2023.

s/   
Curtis E. Harris